



Atty. Dkt. No. 056859-0196

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: H. SIVARAMAN et al.  
Title: PROCESS FOR PRODUCTION OF  
LARGE AMOUNT OF PENICILLIN V  
ACYLASE  
Appl. No.: Unassigned  
Filing Date: 03/30/2004  
Examiner: Unassigned  
Art Unit: Unassigned



**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Mail Stop PATENT APPLICATION  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Hephzibah SIVARAMAN  
Vishnu Archana PUNDLE  
Gopalan Cheravakkattu SURESH  
Guy George DODSON  
Antony James BRANNIGAN

[ X ] This is a continuation of International Application PCT/IB03/06198, having an international filing date of December 24, 2003. This International Application has not yet published.

Enclosed are:

☒ Application Data Sheet (37 CFR 1.76) (4 pages).

☒ Preliminary Amendment (3 pages).

☒ Specification, Claim(s), and Abstract (11 pages).

☒ Formal drawings (3 sheets, Figures 1-2).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$770.00	=	\$770.00
Total	9	-	20	= 0	x		\$18.00	=	\$0.00
Claims:									
Independents	3	-	3	= 0	x		\$86.00	=	\$0.00
:									
If any Multiple Dependent Claim(s) present:					+		\$290.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of					+		\$130.00	=	\$130.00
Executed Declaration and late payment of filing fee									
							SUBTOTAL:	=	\$900.00
<input type="checkbox"/>							Small Entity Fees Apply (subtract ½ of above):	=	\$0.00
							TOTAL FILING FEE:	=	\$900.00

☐ A check in the amount of \$0.00 to cover the filing fee is enclosed.

☒ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

☐ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated,

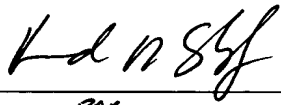
otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: March 30, 2004

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By  39,370  
FOR

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